

# Area III Legal Center

## LEGAL ACTION REQUEST FORM

### I PERSONAL DATA

<u>UNIT:</u>	<u>RANK:</u>	<u>NAME (LAST, FIRST, MI):</u>					
<u>SSN:</u>	<u>RACE / SEX:</u>	<u>Date of Offense:</u>	<u>PEBD:</u>	<u>BASD</u>	<u>ETS</u>	<u>TIS</u>	<u>PROMOTABLE</u>

### II TYPE OF ACTION REQUESTED

NONJUDICIAL PUNISHMENT: CHECK LEVEL OF ART 15

<input type="checkbox"/> <b>SUMMARIZED ART 15</b>  <u>DOCS NEEDED:</u> COUNSELING STMTS, MP RPTS, SWORN STMTS, ETC; ERB, and FLAG	<input type="checkbox"/> <b>FORMAL ART 15</b> CG: <input type="checkbox"/> FG: <input type="checkbox"/>  <u>DOCS NEEDED:</u> COUNSELING STMTS, MP REPTS SWORN STMTS, ETC; ERB, and FLAG	<input type="checkbox"/> <b>ART 15 - SUPPLEMENTARY ACTIONS:</b> <input type="checkbox"/> VACATION OF SUSPENSION <input type="checkbox"/> REMISSION <input type="checkbox"/> MITIGATION <input type="checkbox"/> SETTING ASIDE <input type="checkbox"/> SUSPENSION OF PUNISHMENT
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### ADMINISTRATIVE SEPARATIONS (CHAPTERS)

<input type="checkbox"/> <b>CH 5-8 FAMILY CARE PLAN</b> HON DISCH / BDE CDR=APPROV AUTH <u>DOCS NEEDED:</u> FAMILY CARE PLAN COUNSELING (DA FORMS 5304 & 5305, COUNSELING STMTS IAW AR 635-200, PARA 1-16, STMT FROM SM STATING WHY HE/SHE CANNOT PROVIDE FCP, ERB, and FLAG PHYS EXAM NOT REQUIRED.	<input type="checkbox"/> <b>CH 5-13 PERSONALITY DISORDER</b> HON DISCH/BDE CDR=APPROV AUTH <u>DOCS NEEDED:</u> DA FORM 3822-DIAGNOSIS MEMO FROM MENTAL HEALTH, COUNSELIG STMTS IAW AR 635-200, PARA 1-16, ERB, and FLAG PHYS EXAM <u>NOT</u> REQUIRED.	<input type="checkbox"/> <b>CH 5-17 OTHER PHYSICAL / MENTAL CONDITIONS</b> HON DISCH/ BDE CDR = APPROV AUTH <u>DOCS NEEDED:</u> DA 3822-DIAGNOSIS MEMO FROM MENTAL MENTAL HEALTH, COUNSELING STMTS IAW AR 635-200, PARA 1-16, ERB, and FLAG <u>PHYSICAL EXAM REQUIRED.</u>
<input type="checkbox"/> <b>CH 9 ADAPCP REHAB FAILURE</b> HON / GEN DISCH; BN CDR = APPROV AUTH * <u>DOCS NEEDED:</u> ADAPCP ENROLLMENT, ADAPCP REHAB FAILURE MEMO FROM REHAB TEAM, ERB + DA 2-1, PHYS EXAM REQUIRED  * NO BOARD	<input type="checkbox"/> <b>CH 11 ENTRY LEVEL STATUS</b> UNCHAR DISCH , BN CDR = APPROV AUTH * <u>DOCS NEEDED:</u> COUNSELING STMTS IAW AR 635-200, PARA 1-16, ERB + DA 2-1, PHYS EXAM REQUIRED  * NO BOARD	<input type="checkbox"/> <b>CH 13 UNSATISFACTORY PERFORMANCE</b> HON / GEN DISCH, BN CDR = APPR AUTH * <u>DOCS NEEDED:</u> EVIDENCE OF UNSAT PERFORMANCE (APFT SCORE CARDS, WPNS QUAL FAILURE, ETC), COUNSELING STMTS IAW AR 635-200, PARA 1-16, ERB + DA 2-1, PHYSICAL/ MENTAL EXAM REQUIRED * NO BOARD
<input type="checkbox"/> <b>CH 14 MISCONDUCT</b> <input type="checkbox"/> CH 14-12A: MINOR INFRACTIONS <input type="checkbox"/> CH 14-12B: PATTERNS OF MICONDUCT <input type="checkbox"/> CH 14-12C: COMM OF A SERIOUS OFFENSE  GEN DISCH/ BDE CDR=APP AUTH OTH/HON DISCH=GCMCA: <u>DOCS NEEDED:</u> ART 15s, MP RPTS, POS URIN RPTS, C-STMTS IAW AR 635-200, PARA 1-16, PHY/MEN EXAM REQ, ERB + DA 2-1 RECOMMENDED LEVEL OF COURT-MARTIAL: <input type="checkbox"/> SUMMARY COURT-MARTIAL	<input type="checkbox"/> <b>CH 15 HOMOSEXUAL CONDUCT</b> HON / GEN DISCH, BDE CDR=APP AUTH UOTH DISCH, GCMCA=APP AUTH (PRIOR TO REQUESTING, SPEAK TO ENG BDE TRIAL COUNSEL) <u>DOCS NEEDED:</u> PHYSICAL / MENTAL EXAM REQUIRED, ERB + DA 2-1  <input type="checkbox"/> SPECIAL COURT-MARTIAL <input type="checkbox"/> SPECIAL BCD	<input type="checkbox"/> <b>CH 18 WEIGHT CONTROL FAILURE</b> HON DISCH, BN CDR = APPROV AUTH * <u>DOCS NEEDED:</u> WGHT CONTROL PROG ENROLLMENT, NUTRIT COUNS, WEIGH-IN SHTS, WGHT CONTROL PROG, COUNSELING STMTS IAW AR 635-200, PARA 1-16, ERB + DA 2-1, PHYS EXAM REQUIRED, ADDITIONAL COUNSELING REQ * NO BOARD  <input type="checkbox"/> GENERAL COURT-MARTIAL

COMMANDER'S SIGNATURE AND PRINT SIGNATURE BLOCK:

DATE: ACTION WAS SIGNED

RECEIVED BY LEGAL: